PTO/SB/06 (07-06)

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U.S. Patent and Tradems Chice; U.S. Debarts of information unless it itembrary and its OMB center and unless the information unless it itembrary and its U.S. Patent and Tradems of information unless it itembrary a uniformation unless its information unless its informati

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/715,337			ing Date 17/2003	To be Mailed		
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY			
Н	FOR		NUMBER FILED		NUMBER EXTRA		П	RATE (\$)	FEE (\$)	T	RATE (\$)	FEE (\$)		
⊠	BASIC FEE (37 CFR 1.16(a), (b),	_	N/A		N/A			N/A	385	1	N/A	(4)		
$\boxtimes$			N/A		N/A			N/A	0	1	N/A			
⊠		E	N/A		N/A			N/A	0	1	N/A			
	TAL CLAIMS CFR 1.16(i))		45 minus 20 =		· 25			X \$9 =	225	OR	x s =			
	EPENDENT CLAIM CFR 1.16(h))				• 6			X \$43 =	258		x \$ =			
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and dra- sheets of paper, the applic is \$250 (\$125 for small ent additional 50 sheets or frac 35 U.S.C. 41(a)(1)(G) and			n size fee due for each i thereof. See								
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									1				
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL	868	]	TOTAL			
	APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
AMENDMENT	11/08/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1 160))	· 45	Minus	<b>↔</b> 45		= 0	П	X \$25 =	0	OR	x s =			
	Independent (37 CFR 1.16(h))	• 9	Minus	<b>9</b>		= 0	П	X \$105 =	0	OR	x s =			
	Application Size Fee (37 CFR 1.16(s))									П				
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR				
								TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE			
(Column 1) (Column 2) (Column 3)														
L		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
N N	Total (37 CFR 1,16())		Minus	**			П	x \$ =		OR	x s =			
AMENDMENT	Independent (37 CFR 1,16(h))		Minus	ŧ			П	x \$ =		OR	x s =			
Ш	Application Size Fee (37 CFR 1.16(s))						П			]				
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))							TOTAL		OR				
										OR	TOTAL ADD'L FEE			
** 16	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.													

This collection of information is orquined by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public with in it is life (and by the USPTO to process) an application Confidentiality is operand by 38 US 6.2 22 and 37 CFR 1.4. 1 this collection is estimated to the 12 minutes to complete, encuding pathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the CERF (information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrius, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandrius, VA 22313-1450.